Kentucky Retaliatory Fee Summary Page

Company Name on Check (Fee Paid by)

Date Check Mailed with this Fee Summary Attached

1 3		` ' '			j		
Company Telephone Number (Preferably Toll free)			Compa	Company NAIC Number			
Check Amount				Type of Filing			
				ife			
				Health Property and Casualty			
Check Number				Company Filing Number			
Date on Check	ζ		Submis	Submission/SERFF Tracking Number			
		Re	taliatory Fili	ng Fee Calculation			
1 6		State of Domicile	Show Retaliatory Fee Calculation			Fee Total	
			Total of	Retaliatory Fees for	this Filing Submission		
For State Use	Only						
Account				Check Number			
Date				Initials			
Amount				Reviewer			
DOI Filing				Recorded in			

SERFF

Number